

ABSTRACT OF SANITARY REPORTS.

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UNITED STATES.

SPECIAL REPORTS.

Inspection service at Sault St. Marie.—Acting Assistant Surg. Floyd reports as follows:

OCTOBER 4, 1892.

SIR: Fifteen immigrants arrived at the Canada Sault from Quebec, where they landed from steamer *Parisian*. They brought with them certificates for each person from quarantine officers at Grosse Isle and Quebec as to their having been bathed and their baggage thoroughly disinfected by heat and carbolic solution. I also detained and submitted their baggage to steam heat for one hour, and they are all in good health.

To the SUPERVISING SURGEON-GENERAL M.-H. S.

Necessity of continued vigilance during the winter to prevent introduction of cholera—Precautions required on the Canadian frontier.

The following letter has been received from Dr. Henry B. Baker, secretary of the State board of health of Michigan:

MICHIGAN STATE BOARD OF HEALTH,
OFFICE OF THE SECRETARY,
Lansing, Mich., October 5, 1892.

DEAR DOCTOR: September 6, in order to protect the State of Michigan and the Northwest from the introduction of cholera, the Michigan State board of health declared a quarantine, on its eastern border, of twenty days' detention of all "immigrants from an European port by way of any seaport in the Dominion of Canada," supplementing your order approved by the President September 1, 1892. That rule is still in force, except that since September 26 a special committee has been authorized by the State board of health to act in cases arising under it; but before acting for the release of immigrants detained, the committee requires a thorough disinfection of baggage of any such immigrant.

The regular meeting of this State board of health is to be next Tuesday, when the subject will come up again, and I write to ask you to write me so that I will get your letter before Tuesday, giving me what information you can that will be of use to this board at that meeting. Kindly advise me as to what extent the United States order for quar-

antine detention of twenty days is being carried out, especially on the Atlantic seaboard. Immigration into this country by way of the St. Lawrence is still considerable, and there is no detention of immigrants who come by way of Liverpool and other ports supposed to be uninfected until the immigrant reaches the Michigan border. Here they are detained long enough to permit of an inspection of persons and disinfection of baggage. Some of them come on vessels, as, for instance, the steamship *Parisian* from Liverpool to Montreal, on which "no steerage passengers were carried." Some of the immigrants for a considerable portion of their journey have been associated with immigrants from Hamburg and other infected places.

Is it not true that, in late years, cholera has not gained an entrance into this country by way of a ship *known* to be infected, or on a ship from a port *known* to be infected? The recent experience in New York is of this same character. Cholera came into New York, but probably not by either of the ships *known* to be infected with cholera. In 1873 cholera was carried into Carthage, Ohio, Crow River, Minn., and Yankton, S. Dak., in personal effects of immigrants who were not sick and who had come to New York City on vessels believed to be uninfected. The point I wish to make is, that the greatest danger of the introduction of cholera into this country is not by way of vessels like the *Normannia*, known to be infected, and with which every precaution is taken at the seaboard, but the greatest danger is in the baggage of immigrants who come from some port believed to be uninfected, their baggage being allowed to pass without disinfection. This is one reason why I think there should be a line of inspection and *disinfection* extending from Sault St. Marie, Mich., certainly as far south as Lake Erie, and preferably as far south as Kentucky. Such a line of inspection and disinfection would not be extremely expensive; I do not think it would cost more than would six cases of cholera in the city of Detroit or in Chicago.

If cholera were to occur in the country, or a small city, it would probably be easily stamped out; but in Detroit or Chicago the case might be far different. So far as Michigan and the Northwest are concerned, Detroit and Chicago are vital and vulnerable points. It seems to me that extraordinary care should be used to prevent the entrance of cholera into either of these places.

With the cessation of cholera in New York and in the port of New York, the public and some health authorities seem to conclude that there is no longer danger from the introduction of cholera. I would be glad if you would give me an expression of your views. Cholera seems to be still present in all foreign countries where it has heretofore been reported, and is reported now in a number of new countries. Other things being equal, does not this seem to indicate that the danger of the introduction of cholera into this country is increasing? I suppose the immigration will slacken somewhat during the winter, but will probably begin again early in the spring.

So far as concerns the immigration through and into Michigan, by way of the St. Lawrence, it will be more dangerous after the navigation closes than it is now, unless something different from what has been done heretofore is done at Portland, Halifax, and St. Johns, where the immigrants will disembark.

Dr. Bryce has again gone to Detroit. He opposes any safeguard at that point. The health officer of Detroit is doing what he can to break

down an efficient system of inspection and disinfection there. Some of the railroad officials seem to be averse to such a system. You will probably be importuned to do away with the system. I trust that you will give the subject careful attention. You undoubtedly realize that there are great interests in the Northwest, besides the World's Fair, which may perhaps be protected only through an efficient system of inspection and disinfection along our Eastern border.

To the SUPERVISING SURGEON-GENERAL M.-H. S.

Following is the reply :

TREASURY DEPARTMENT,
OFFICE OF SUPERVISING SURGEON-GENERAL M.-H. S.,
Washington, D. C., October 8, 1892.

DEAR DOCTOR: I have the honor to acknowledge the receipt of your letter of the 5th instant, and in reply to your inquiry, "as to what extent the United States order for quarantine detention of twenty days is being carried out, especially on the Atlantic seaboard," I have to state that the circular of September 1, imposing a twenty days' quarantine upon all vessels bringing immigrants into the United States, the said detention being imposed for the purpose of causing a suspension of immigration, has resulted in a practical cessation of the same into American seaports. In the enforcement of this order it was found that in a few instances immigrants have been booked and assembled on the other side for transportation to this country before the issue of the Department circular, and inasmuch as heavy penalties are imposed by foreign governments for the nonfulfillment of contracts of this kind, in these several instances special consideration has been given nearly all of them, it having been shown that at least twenty days had expired between the date of their embarkation and the entry of the vessel, but in each case a special report upon the ship, cargo, and the immigrants and their baggage has been made by the regular officer of the Marine-Hospital Service, and a certificate given as to the safety of the same.

It is believed that there will be no more of these exceptional cases; and any vessel bringing immigrants hereafter that were booked after September 1 will be subject to the full twenty days' quarantine. The steamship companies, however, have given every assurance that there will be no effort made to override the wishes of the Government; and it appears now that the only immigrants who may come to the United States for an indefinite time will be such as may arrive upon tramp steamers, in expectation of serving out the twenty days' detention.

Your views concerning the great danger of introduction of cholera through the medium of baggage of immigrants arriving from some port believed to be uninfected, and upon a vessel without any history of infection, are entirely in accord with my own, which I expressed in a letter to the Secretary of the Treasury as early as July 7. (See ABSTRACT OF SANITARY REPORTS, dated July 15, 1892, p. 318.)

By reference to Department circulars of August 17 and 24, however, it will be seen that no baggage of immigrants is allowed entry into the United States at any seaport without previous disinfection, and by reference to Department circular of September 3, 1892, it will be seen that no immigrants' baggage is allowed into the United States through the Canadian border without previous disinfection. To enforce this

latter provision a line of inspectors has been established from the Maine frontier to the Pacific coast. There are three classes of these inspectors:

1. The medical inspectors especially appointed for this object.
2. The regular immigrant inspectors appointed under the immigration act.
3. The customs inspectors.

The last two classes have been specially ordered to aid in this regular work. If there is a point on the frontier which is unguarded by these inspectors, I would be glad to be informed of it.

With regard to your suggestion that there should be a line of inspection and disinfection extending from Sault St. Marie, Mich., as far south as Lake Erie, I have to inform you that there is such a line in operation now, and there are special medical inspectors appointed at Sault St. Marie, St. Clair, Port Huron, and Detroit, there being at the last-named port four medical inspectors for this purpose.

With regard to extending the line as far south as Kentucky, the necessity for this at the present time is not apparent. I would be glad to have you explain why you suggested this, inasmuch as there are inspectors also stationed along the shore line of Lake Erie.

With regard to disinfection, it is held in general that the railroad companies who bring the immigrants to our borders should be made to pay the cost of the same, inasmuch as they have been duly notified of the requirements of the Government, and when the disinfection is done directly on the border it must be done under the inspection and to the satisfaction of the Government medical officer. In illustration of this, I beg leave to refer to the report of the medical inspector at Sault St. Marie, under dates of September 9, 11, 14, 18, and 23, published in the *ABSTRACT OF SANITARY REPORTS*, showing that he had personally supervised the disinfection of immigrants' baggage by steam. This process, it is believed, can be very readily carried out at every point on the border, particularly by the use of the locomotive and box car belonging to the railroad company.

In this connection, I have to state that I am to-day in receipt of a letter from the acting assistant surgeon at Sault St. Marie, requesting information with regard to the detention of immigrants, and stating that "there is not, nor has been at any time since the quarantine has been ordered, any State or local health officer enforcing, or doing anything towards enforcing, their orders for the detention of immigrants."

In accordance with the recommendation of Surg. Stoner, additional inspectors have been appointed at Detroit for the purpose of carrying out the wishes of the State board of health; but if a long period of detention is to be enforced by the State, the medical inspectors of this Bureau are required to aid therein, and it would seem incumbent upon the State to provide some officer whom these inspectors could aid. No quarantine detention of twenty days has as yet been imposed by the General Government at the Canadian border, but the duties of the medical inspectors under orders from this Bureau, as set forth in Department circular of September 3, are to board incoming trains, and to see that no baggage of immigrants is allowed entry without previous disinfection.

Trusting that I have answered your inquiries satisfactorily,

I have the honor to remain, very respectfully, yours,

WALTER WYMAN,

Supervising Surgeon-General M.-H. S.

DR. HENRY B. BAKER,

Secretary State Board of Health, Lansing, Mich.

Supposed cases of cholera at Grahwick, near Tonawanda, N. Y.—The following report has been received from U. S. Medical Inspector Charles A. Ring:

SUSPENSION BRIDGE, N. Y., October 7, 1892.

SIR: Yesterday and last evening it was stated that there had been 2 deaths from cholera, and that there were 5 cases of this disease in Grahwick, a suburb of North Tonawanda.

This morning I called upon Dr. C. W. Jayne, health officer of North Tonawanda. Upon his invitation I accompanied him to the house in which the cases were located. Seven in the morning I again visited the house in company with Dr. E. Wende, health commissioner of Buffalo and Dr. W. H. Bergtold, present upon the call and invitation of Dr. Jayne, for consultation and advice.

The house is one story, wooden, without cellar or sewerage, and supplied with Niagara water from a street hydrant. It is about 20 by 30 feet, with a kitchen addition. There is a living room, a sitting room with two beds, and two small bedrooms with a bed in each. The house and surroundings were very dirty, almost filthy.

The family consisted of Frank Kalma, aged 35 years; his wife (about six months pregnant), one son about 3½, and an infant, and five men boarders, all supposed to be Hungarians, and all in this country over one year, excepting one man, here about three months. The men worked in iron works near by.

On Monday they all partook from a common dish of a dinner prepared from meat and vegetables. The meat is stated to have been pork, but this is doubted. It is thought that the meat was badly tainted, and that the vegetables were almost spoiled, they all being bought at a very low price.

It is stated that about Saturday and Sunday Kalma had been drinking heavily.

Kalma was taken sick on Tuesday morning about 10 and died after 11 that night. He was visited once by Dr. Tebor, who, calling next morning, found him dead. He thought the symptoms and signs those of Asiatic cholera, and notified Dr. Jargen, who saw the body, ordered it packed in lime in a coffin, and buried Wednesday night.

During Wednesday Kalma's oldest son was taken, and died after about seven hours. He was attended by Dr. Jargen.

Dr. Jargen convened the board of health, and they have taken all precautions. There are two guards.

Yesterday the inmates had diarrhea, slight, going to the privy back of the house. To-day one member had two movements. There has been no disturbance of the stomach. All are up to-day.

In the house next, the man had diarrhea yesterday, but no movement of the bowels up to noon. He had been drinking for two or three days.

The inmates have received letters and papers from the old country. No other means of contagion could be discovered.

After consultation, the cases were thought to be either ptomarin toxemia or cholera. Cultures will be made. Quarantine will be maintained.

Doctor Wende stated that he should not quarantine between Buffalo and Tonawanda.

There was some anxiety on the part of the Canadian customs officials at Clifton (where I have my quarters in the Rosli Hotel). I have explained the situation to Mr. Flynn, their collector, who will not establish quarantine.

To the SUPERVISING SURGEON-GENERAL M.-H. S.

The following telegram from Ernest Wende, the health commissioner of Buffalo, received on the 10th instant, gives additional information :

BUFFALO, October 10, 1892.

Symptoms as described by Dr. Jayne, local health officer, also as given by members of family, simulate Asiatic cholera. Can not satisfactorily trace origin. Both father and son have been in this country about eighteen months. It is alleged that the family were visited by immigrants from Hungary on the way West about ten days prior to deaths. It has also been stated that the deceased had partaken of putrid meat, for which there is no foundation. From personal investigation should regard them as very suspicious. Will wire result of bacteriological research as soon as known.

A telegram was sent in reply to this, asking Dr. Wende to ascertain, if possible, further particulars about the Hungarian immigrants, their destination, and at what point they entered the United States.

Report upon condition of steamships Masillia and Polaria.—Passed Assistant Surg. Kinyoun writes as follows :

NEW YORK QUARANTINE, October 6, 1892.

SIR: Confirming my telegram of this date in regard to the steamship *Masillia*, I have the honor to state that I have this day made an inspection of the above steamer, and report as follows :

The *Masillia* arrived in quarantine, eight days ago and was released this morning after their baggage was again disinfected.

I mustered the crew and passengers on deck, and gave each a personal inspection, and found every one in good health save one passenger, a woman who had given birth the night before.

There has been no case of suspicious illness on board during the voyage or while in quarantine. The sanitary condition of the vessel is good ; everything in the steerage clean and in good order. Total number on board, 518—crew, 42 ; passengers, 476.

The cargo is from Marseilles and Naples, and is of such a character that it is not liable to convey contagion of any kind.

To the SUPERVISING SURGEON-GENERAL M.-H. S.

OCTOBER 6, 1892.

SIR: Referring to my telegram of this date, relative to the steamship *Polaria*, I have the honor to report as follows :

The *Polaria* was released by the health officer this morning, and I made an inspection as soon as I was informed.

The crew and passengers were mustered and inspected. I found all well, no case of illness having occurred during the voyage or while in quarantine. There was one birth two days before my inspection.

All the personal effects of these immigrants were disinfected by bi-chloride of mercury and by steam.

The cargo is one of a miscellaneous character, among which is 2,600 bags of sugar from Stettin (?). The vessel will discharge her cargo under quarantine regulations.

I consider her perfectly safe.

To the SUPERVISING SURGEON-GENERAL M.-H. S.

Cape Charles Quarantine.

Treatment of steamship München.—The following report has been received from Surg. Carter:

SEPTEMBER 30, 1892.

SIR: The German steamship *München* arrived last night, and was boarded this morning. Has 1,212 passengers, steerage, and 97 in crew. No suspicious sickness and no deaths en route. No quarantineable disease on arrival, but passengers look badly, anæmic and listless, doubtless from crowding and rough passage. She has the usual consular certificates that the vessel and passengers' baggage were disinfected under his control; that no passenger came from a locality infected with cholera at the time of leaving, and that all had been under sanitary control at Bremen before embarkation. No Russians aboard save some returned from Buenos Ayres.

The cargo is all good, but will steam twenty-three bundles of bags. The baggage the passengers have with, them will be disinfected to-day, to-morrow, and next day.

Relative to the packed baggage in the hold, I would say that this has not been disinfected so far on any similar vessel, and it would take from eight to fourteen days to do so with the means at my disposal, with an almost certain injury to a considerable extent. This has been unpacked and submitted to a process of disinfection in Bremen under the direction of the United States consul; of the value of which I have little certain data. As this baggage has passed hitherto, and if from noninfected districts, as the consul certifies, and which is pretty certainly true, because no cholera has yet arisen in Bremen, which would have happened if much infected baggage was there handled and spread out, I will not disinfect it unless ordered by the Department. There is probably 130 tons of it in boxes, iron-bound and otherwise strongly secured.

To the SUPERVISING SURGEON-GENERAL M.-H. S.

Telegrams.

OCTOBER 10, 1892.

Steamer *Virginia* from Hamburg for Baltimore; no passengers; all well; general cargo held for disinfection and usual quarantine.

HUTTON.

Nova Scotia bark *H. B. Cann*, from Ilo Ilo, Philippine Islands; cargo sugar; for Delaware Breakwater; arrived here with 10 of crew of 13 sick with beri-beri, and 2 deaths on voyage. Gave pratique, and advised to send all sick to hospital at Norfolk.

HUTTON.

VESSELS REMAINING, ARRIVING AT, AND DEPARTING FROM UNITED STATES QUARANTINE STATIONS.

CAPE CHARLES QUARANTINE.

Week ended October 8, 1892.

Name of vessel.	Date of arrival.	Where from.	Destination.	Treatment of vessel and cargo.	Date of dep'ture.
Ger. steamship München a.....	Sept. 30	Bremerhaven.	Baltimore...	Disinfected	Oct. 5
German steamship Scandia a.....	Sept. 30	New York...	.....do.....	Detained 3 days for observation.	Oct. 3
British ss. Robt. Harrowing...	Oct. 2	Poti .....	.....do.....	Held for disinfection.	

a Previously reported.

Seventeen vessels inspected and passed.

DELAWARE BREAKWATER QUARANTINE.

Week ended October 8, 1892.

Barge Willie and Bennie a.....	Sept. 25	Phila.....	.....	Held for disinfection.	
Phila. Trans. and Light. Co. barge, No. 2 a	Sept. 25	.....do.....	.....	.....do.....	
Belgian ss. Switzerland	Oct. 5	Antwerp	Phila.....	.....do.....	
British ss. Tancarville.....	Oct. 8	Havre .....	.....do.....	.....do.....	

a Previously reported.

Twenty-eight vessels inspected and passed.

GULF QUARANTINE.

Week ended October 6, 1892.

British steamship May a.....	Sept. 10	Vera Cruz...	Mobile.....	Disinfected	Oct. 6
Am. sch. Carrie A. Buckrean a	Sept. 24	Cuba .....	.....do.....	.....do.....	Oct. 1

a Previously reported. Given free pratique.

SAN DIEGO QUARANTINE.

Week ended October 5, 1892.

Four vessels inspected and passed.

SOUTH ATLANTIC QUARANTINE.

Week ended October 1, 1892.

Portuguese bark Audacia a ...	Sept. 5	Rio Janeiro.	Savannah ...	Disinfected.....	Sept. 26
German bark Catalina a.....	Sept. 8	.....do.....	Tybee for orders.	.....do.....	Sept. 29
British bark Talisman.....	Sept. 25	Plymouth, Eng.	Sapelo.....	Held for disinfection.	
British steamship Malabar....	Sept. 25	Hamburg....	Port Royal..	.....do.....	

a Previously reported.

Reports of States, and yearly and monthly reports of cities.

ARKANSAS—*Little Rock*.—Month of September, 1892. Population, 35,000. Total deaths, 52, including phthisis pulmonalis, 8; enteric fever, 1; diphtheria, 2; and whooping cough, 2.

CALIFORNIA—*Los Angeles*.—Month of September, 1892. Population, 65,000. Total deaths, 50, including phthisis pulmonalis, 7; enteric fever, 1; and whooping cough, 1.

Sacramento.—Month of September, 1892. Population, 28,000. Total deaths, 30, including phthisis pulmonalis, 5; enteric fever, 1; and scarlet fever, 1.

CONNECTICUT—*Bridgeport*.—Month of September, 1892. Population, 48,740. Total deaths, 62, including 6 from phthisis pulmonalis.

FLORIDA—*Pensacola*.—Month of September, 1892. Population, 15,000. Total deaths, 23, including phthisis pulmonalis, 1; enteric fever, 5; and measles, 1.

INDIANA—*Evansville*.—Month of September, 1892. Population, 50,756. Total deaths, 72, including phthisis pulmonalis, 9; enteric fever, 10; and diphtheria, 3.

IOWA.—Months of July and August. The following mortuary report is extracted from the Monthly Bulletin for September:

Burlington.—August. Consumption, 3; pneumonia, 1; typhoid fever, 1; cholera infantum, 4; dysentery, 1. Total deaths, 33. Population, 30,166. Death rate per 1,000, 1.06. For July, 0.79.

Cedar Rapids.—No report.

Council Bluffs.—August. Consumption, 1; typhomalarial fever, 1; malarial fever, 1; dysentery, 1; cholera infantum, 4. Total deaths, 18. Population (estimated), 35,000. Death rate per 1,000, 0.55. For July, 0.57.

Davenport.—July. Consumption, 8; pneumonia, 1; membranous croup, 1; meningitis, 1; cholera infantum, 2. Total deaths, 44. Population (estimated), 34,500. Death rate per 1,000, 1.03. For June, 0.69.

For August. Consumption, 4; meningitis, 2; cholera infantum, 3. Total deaths, 33. Death rate per 1,000, 0.95.

Des Moines.—August. Consumption, 5; pneumonia, 2; diphtheria, 5; typhoid fever, 1; cholera infantum, 10. Total deaths, 69. Population, 68,574. Death rate per 1,000, 1.01. For July, 0.53.

Dubuque.—August. Consumption, 4; pneumonia, 2; cholera infantum, 13. Total deaths, 50. Population, 35,000. Death rate per 1,000, 1.25. For July, 1.02.

Keokuk.—July. Typhoid fever, 1; malarial fever, 1; cholera infantum, 1; pneumonia, 1; diphtheria, 1; membranous croup, 1. Total deaths, 12. Population (estimated), 19,284. Death rate per 1,000, 0.6. For June, 0.47.

For August. Consumption, 5; diphtheria, 1; typhomalarial fever, 1; cholera infantum, 2; dysentery, 1. Total deaths, 23. Death rate per 1,000, 1.06.

Muscatine.—June. Consumption, 1. Total deaths, 7.

For July. Cholera infantum, 3; typhoid fever, 1. Total deaths, 10. Population, 12,000. Death rate per 1,000, 0.8.

Oskaloosa.—July. Consumption, 3; dysentery, 1. Total deaths, 7. Population, 7,300. Death rate per 1,000, 0.9.

Ottumwa.—August. Consumption, 1; cholera infantum, 6; typhoid fever, 1. Total deaths, 20. Population, 16,000. Death rate per 1,000, 1.25. For July, 0.68.

Sioux City.—No report.

Davenport.—Month of September, 1892. Population, 34,500. Total deaths, 20, including phthisis pulmonalis, 5; enteric fever, 1; and croup, 2.

Dubuque.—Month of September, 1892. Population, 40,000. Total deaths, 23, including phthisis pulmonalis, 2; and diphtheria, 1.

Keokuk.—Month of September, 1892. Population, 19,264. Total deaths, 14, including phthisis pulmonalis, 3, and diphtheria, 1.

MARYLAND—*Baltimore*.—Month of September, 1892. Population, 455,427. Total deaths, 741, including phthisis pulmonalis, 78; enteric fever, 26; scarlet fever, 1; diphtheria, 22; croup, 3; measles, 1; and whooping cough, 2.

MICHIGAN.—Week ended October 1, 1892. Reports to the State board of health, Lansing, from 70 observers indicate that inflammation of kidney, diphtheria, and typhomalarial fever increased, and that inflammation of brain, pleuritis, whooping cough, bronchitis, and scarlet fever decreased in area of prevalence.

Diphtheria was reported present during the week at 22 places, scarlet fever at 39, enteric fever at 54, and measles at 1 place.

Month of October, 1892. Reports from observers compared with the preceding month indicate that scarlet fever, diphtheria, pneumonia, dysentery, erysipelas, inflammation of brain, and typhomalarial fever increased, and that puerperal fever, cerebro-spinal meningitis, measles, influenza, and inflammation of kidney decreased in area of prevalence.

Compared with the average for the month of September in the six years 1886-1891, scarlet fever was more prevalent, and smallpox, puerperal fever, measles, cerebro-spinal meningitis, typhomalarial fever, erysipelas, and intermittent fever were less prevalent in September, 1892.

Including reports by regular observers and others, diphtheria was reported present in Michigan in the month of September, 1892, at 42 places; scarlet fever, 66; typhoid fever, 110; measles, 3 places; and 1 death in Royalton township from suspected cholera.

Reports from all sources show diphtheria reported at 6 places less, scarlet fever at same number of places, typhoid fever at 24 places more, and measles at 8 places less in the month of September, 1892, than in the preceding month.

MINNESOTA—*Winona*.—Month of September, 1892. Population, 20,000. Totals deaths 25, including 2 from scarlet fever and 1 from croup.

MISSOURI—*Kansas City*.—Month of September, 1892. Population, 132,716. Total deaths, 143, including phthisis pulmonalis, 11; enteric fever, 6; diphtheria, 3; croup, 1; and whooping cough, 5.

NORTH CAROLINA.—Month of August, 1892. Reports to the State board of health from 16 towns, having an aggregate population of 82,100, show a total of 147 deaths, including phthisis pulmonalis, 12; enteric fever, 19; and whooping cough, 3.

OHIO—*Cincinnati*.—Month of September, 1892. Population, 305,000. Total deaths, 411, including phthisis pulmonalis, 36; enteric fever, 12; scarlet fever, 1; diphtheria, 21; and whooping cough, 3.

Cleveland.—Month of September, 1892. Estimated population, 290,000. Total deaths 397, including phthisis pulmonalis, 25; enteric fever, 23; scarlet fever, 3; diphtheria, 19; croup, 6; and whooping cough, 1.

Dayton.—Month of September, 1892. Population, 63,000. Total deaths, 84, including phthisis pulmonalis, 9; croup, 2; and enteric fever, 4.

PENNSYLVANIA—*Williamsport*.—Month of September, 1892. Population, 27,132. Total deaths, 32, including enteric fever, 3; diphtheria, 3; and whooping cough, 1.

RHODE ISLAND—*Newport*.—Month of September, 1892. Population, 20,000. Total deaths, 40, including phthisis pulmonalis, 4; enteric fever, 1; and croup, 1.

TENNESSEE—*Nashville*.—Month of September, 1892. Estimated population, 87,754. Total deaths, 131, including phthisis pulmonalis, 22; enteric fever, 5; diphtheria, 1; and croup, 1.

TEXAS—*El Paso*.—The United States sanitary inspector reports as follows under date of September 30, 1892:

During the past month 134 passengers, coming from the interior of Mexico on the Mexican Central Railroad, and believed to come from some places where contagious disease is said to exist, were required to make affidavit that neither themselves nor their baggage had been in any city or place where yellow fever, smallpox, or cholera actually was. September 19 an English gentleman, having left Vera Cruz on the 4th of the same month, was denied admittance into the United States until September 24.

Though the news from the Atlantic seaboard would indicate no danger of the introduction of cholera from that point, for the present, the danger is by no means passed, for the semitropical frontier of the country and the ports of the Gulf of Mexico will continue to be exposed

FOREIGN.

(Reports received through the Department of State and other channels.)

CHOLERA.

Supplementary report of cases of cholera at Grangemouth, a port 30 miles west from Leith (see ABSTRACT, September 9, 1892.)

U. S. CONSULATE FOR LEITH AT EDINBURGH, SCOTLAND,
September 20, 1892.

I beg respectfully to report that another case of cholera has occurred at Grangemouth, in the county of Stirling, the person seized with the malady being the second officer of the steamer *Helene Sauber*, from Hamburg. This is the steamer on which the cholera case occurred lately which proved fatal and which I reported on the 25th ultimo. In the present case the steamer on arrival had a clean bill of health, and, no sickness being reported, she was admitted without demur; but on 16th instant, the day when the *Helene Sauber* again left Grangemouth, the man referred to was taken suddenly ill, the symptoms being those of cholera. He was removed to the hospital, and by administration of remedies promptly, he felt easier. By latest account from the medical officer of Grangemouth, to whom I applied for information, I learn that the man is recovering, and there is no other case of cholera at that port.

HUGH C. PEACOCK,
U. S. Vice and Deputy Consul.

Cholera epidemic at Riga, Russia.

CONSULATE OF THE UNITED STATES,
Riga, September 23, 1892.

SIR: I have the honor to inform you that, by the order of the minister of the interior, this port has been declared infected with cholera, which I took the liberty to wire you to-day.

From the 12th up to the 22d instant there have been in all 43 cases, with 21 deaths in this city.

The disease has been slowly progressing, and all efforts are made by the authorities to prevent a further spreading.

I have the honor to be, sir, your most obedient servant (for N. P. A. Bornholdt),

PETER A. SIMONI,
Consul.

To the Hon. WILLIAM F. WHARTON,
Assistant Secretary of State.

"Official" statistics of the cholera epidemic in Russia.

UNITED STATES CONSULATE,

Batoum, September 13, 1892.

SIR: The following figures are taken from the Russian newspapers and reported as "official" in connection with the cholera epidemic in the Caucasus.

The cholera may be said to have first appeared in Russia in the town of Baku (into which place it was brought over from Persia), the first case being reported on the 6th and 18th of June last. As practically no restrictions were placed in the shape of quarantine, disinfecting or other measures, upon people leaving Baku, it is not surprising that the epidemic has spread over the whole of Russia and been also conveyed into many other European countries.

The figures given below are far from correct, inasmuch as they do not include the death rate and number of cases among the soldiers, and many of the district governors have, from time to time, omitted sending in their reports. The totals from July 6-18 to August 1-13 for the Caucasus are as follows:

Localities.	No. of days.	Attacked.	Deaths.	Percentage of deaths.
Baku town (from June 18).....	56	2,501	1,934	77.7
Baku government (from June 29).....	46	4,714	3,210	68.1
Tiflis town (from June 11).....	51	408	188	46.3
Tiflis government (from July 20).....	24	1,710	877	51.2
Elizabethpol government (from June 25).....	49	5,486	2,885	52.6
Dagestan district (from June 30).....	44	12,559	5,674	45.6
Erivan government (from July 19).....	25	2,644	1,431	54.1
Koutais government (from July 24).....	20	90	45	50.0
Takatal district (from July 28).....	16	212	133	62.7
Kars district (from July 29).....	15	483	245	50.6
Vladi-Kavkas town (from July 24).....	20	719	308	42.8
Terek district (from July 8).....	36	16,450	8,039	48.8
Kooban district (from July 9).....	35	7,161	3,611	50.4
Stavropol government (from July 22).....	22	5,819	3,208	55.1

Below I give the daily average of deaths and cases for the periods mentioned above, and from which it is seen that the epidemic was felt chiefly in the Terek and Dagestan districts, especially in the former among the villages along the banks of the rivers Terek and Soonjen.

The least number of cases of and deaths from cholera was in the government of Koutais, of which Batoum is a district town.

Daily average of cases and deaths.

Localities.	Cases.	Deaths.
Baku town.....	45	34
Baku government.....	105	71
Tiflis town.....	7	3
Tiflis government.....	71	36
Elizabethpol government.....	112	59
Dagestan district.....	285	132
Erivan government.....	106	57
Koutais government.....	2	2
Takatal district.....	13	8
Kars district.....	32	16
Vladi-Kavkas town.....	36	15
Terek district.....	457	223
Kooban district.....	205	109
Stavropol government.....	262	146

The percentage of cases and deaths from cholera in the Caucasus per 100 inhabitants of both sexes are as follows:

Localities.	Percentage of cases.	Percentage of deaths per 100 inhabitants.
Terek district (without Vlad-Kavkas).....	2.3	1.1
Dagestan district.....	2.1	.9
Stavropol government.....	.9	.5
Baku government (without Baku).....	.7	.5
Elizabethtown government.....	.7	.4
Kooban district.....	.6	.3
Erivan government.....	.4	.2
Kars district.....	.4	.2
Takatal district.....	.3	.2
Tiflis government (without Tiflis).....	.2	.1
Koutais government.....	.01	.01
Baku town.....	2.7	2.09
Vlad-Kavkas town.....	1.6	.7
Tiflis town.....	.3	.1

For the whole of the Caucasus the percentage of cholera amounts to 8 per cent. and of deaths 4 per cent.

I am, sir, your obedient servant,

T. HARPER HALL,

Acting Consul.

To the Hon. WILLIAM F. WHARTON,

Assistant Secretary of State.

SEPTEMBER 15, 1892.

SIR: On the next page I have the honor to transmit a copy of what are termed the "official" figures of the mortality from cholera in Russia since the outbreak of the epidemic on June 18 until the 1st of September last, from which it will be seen that 144,090 deaths have occurred from the disease, and that the Caucasus in general takes first place, with 53,159 deaths.

I am, sir, your obedient servant,

T. HARPER HALL,

Acting Consul.

To the Hon. WILLIAM F. WHARTON,

Assistant Secretary of State.

Total number of deaths from cholera throughout Russia from June 18 to September 1, 1892.

	Deaths.		Deaths.
The Caucasus in general.....	53, 159	St. Petersburg, town.....	604
District of the Don.....	14, 592	Riazan government.....	335
Saratoff government.....	10, 297	Yaroslavl government.....	292
Samara government.....	9, 728	Ekaterinoslav government.....	291
Transcaspia.....	9, 465	Moscow government.....	204
Astrakhan government.....	7, 541	Poltava government.....	193
Tobolsk government.....	7, 358	Orel government.....	168
Voronej government.....	4, 726	St. Petersburg government.....	118
Simbirsk government.....	3, 702	Vladimir government.....	100
Viatka government.....	2, 885	Lyublin government.....	91
Tamboff government.....	2, 413	Tawris government.....	94
Orenburg government.....	2, 391	Toola government.....	80
Kazan government.....	1, 854	Kostroma government.....	82
Ouraisk district.....	1, 744	Kherson government.....	46
Tomsk government.....	1, 559	Chernigoff government.....	28
Nijni Novgorod government.....	1, 340	Kieff government.....	16
Different points in Siberia.....	1, 198	Tver government.....	8
Oufa government.....	940	Novgorod government.....	1
Penza government.....	919	Kharkoff government.....	2, 057
Kursk government.....	796		
Perm government.....	675		
		Total.....	144, 090

Suspicious choleraic disease at Batoum and Poti.

UNITED STATES CONSULATE,
Batoum, September 15, 1892.

SIR: I have the honor to inform you that there were 2 cases of cholera here yesterday, both ending fatally, thus bringing the number of deaths from cholera in this town since the outbreak of the epidemic to about 15.

I am also informed from Poti that there were 2 suspicious cases there yesterday, in which connection I beg to inform you that the steamship *Lochmore* leaves, or has already left, that port with a cargo of manganese ore for Baltimore.

I am, sir, your obedient servant,

T. HARPER HALL,
Acting Consul.

To the Hon. WILLIAM F. WHARTON,
Assistant Secretary of State.

The cholera in central Europe.

CONSULATE-GENERAL U. S. A.,
Berlin, September 19, 1892.

SIR: I have the honor to hand you herewith a translation of a clipping from the Berlin Lokal-Anzeiger of the 17th instant, containing information in respect of the cholera in central Europe.

I have the honor to be, sir, your obedient servant,

Hon. W. F. WHARTON,
Assistant Secretary of State.

W. H. EDWARDS,
Consul-General.

[Translation from the Berlin Lokal-Anzeiger of September 17, 1892.]

After having raged for months in eastern Russia, whither it had been introduced from India via Persia, the cholera has at last found its way to the seaports of western and central Europe, and thence extended into the interior. At present, as must be borne distinctly in mind, it is impossible to say positively how the disease originated and how it reached the above-mentioned seaports, as the statements made on this subject are uncertain and contradictory and so far have found no support in facts. When, therefore, in the following a short account is given concerning the spread of the cholera in central Europe only the actual phenomena of the appearance of the cholera in an extensive territory are referred to, and not the manner of the original introduction into the west.

The principal cholera areas are in the Caucasus, on the Caspian Sea, and in the Volga country, over which places the cholera made its way into Russia from the southeast, until it finally reached St. Petersburg, on the Baltic Sea. The war port of Petersburg, Kronstadt, has had cholera cases as well as Wyborz, which lies to the north. In the entire land of the regions mentioned the cholera was, as is well known, very severe, and it is still raging there.

In the west, toward the German frontier, individual cases of the cholera appeared in the Government of Lublin in Poland, but apparently it did not cross the German or Austria-Hungarian frontier.

In regard to the origin of the cholera in Havre, Rouen, Paris, Antwerp, and Hamburg, where it was undoubtedly introduced from outside, nothing positive is known. The infection of Hamburg may have come by rail through Germany with Russian emigrants. In like manner it may have come by sea from the Russian-Baltic seaports. Both theories seem to be wrong, as the cholera did not first break out in Hamburg among the Russian emigrants. Moreover, the opinion has recently grown that the disease was introduced into Hamburg through the stokers engaged in India by the great steamship companies. But these questions shall remain undiscussed here.

The fact is that the cholera from Hamburg, which was infected by it soon after the middle of August, this greatest of continental seaports being attacked with extraordinary severity, has spread through the interior.

In nearly all cases, at any rate in the great majority thereof, the cause of the appearance of cholera in the other German towns could be traced to Hamburg or to persons arriving from Hamburg. In what high degree, with the present facilities of communication, which are unchangeable facts, the rest of Germany is exposed to the danger of contagion or to the introduction of severe epidemics is taught by a glance at the map, especially the districts lying near Hamburg, the provinces of Schleswig-Holstein, Hanover, Saxony, Brandenburg; furthermore, the central German states, and, in less degree, the other provinces and states, are in continual danger of the importation of disease. Nevertheless, the number of cholera cases there remained comparatively small, and a notable spread of the disease among the local populations, or the appearance of new, independent cholera centers, did not take place. It is impossible—and this is proof of the insufficiency of the official reports—to obtain even yet reliable reports concerning the number and extension of cases and deaths. From one of the latest publications of the Imperial sanitary department we have the figures which represent the number of places where cholera has occurred in the different governmental districts or counties. These we give here again briefly:

In the governmental districts, Schleswig-Holstein, 58 places; Stade, 22; Lüneburg, 18; Hanover, 1; Hildesheim, 4; Minden and Coblenz, 1 each; Oppeln, 2; Posen, 1; Potsdam, 7; Magdeburg, 5; Stralsund, 1. Furthermore, in Mecklenburg-Schwerin, 18; Mecklenburg-Strelitz, 4; Oldenburg, Brunswick, Kingdom of Saxony, Saxe-Altenburg, 1 each; as also Lübeck, Bremen, Berlin, and Hamburg.

As stated in the official report, most of the cases could be traced as importations from Hamburg. Outside of Hamburg in west Europe there are cholera centers in Antwerp and Paris. In these places, also, the manner in which the disease originated is still disputed. The close connection by sea of the cities mentioned, as well as Rouen and Havre, make an interchange of the disease probable.

Notably, and in a certain sense happily, appears in this entire sad affair the phenomenon that the further spread of the cholera from Hamburg (the great cholera center), in spite of the thousand-branched connection of Hamburg with all Germany, has been of a sporadic form, most of the cases remaining detached. We have succeeded, we can say, in checking the cholera wherever the isolated nursing prescribed by science has been promptly enforced. Even in the English ports, where single imported cases occurred, this has succeeded. This fact is the

only beam of light in the shady picture; it shows that not the shutting off of entire localities ordered here and there in overwrought anxiety is the proper way to protect the public, but only an energetic, conscientious isolation and nursing of the sick. This precaution has, however, in Germany proven itself entirely sufficient.

One case of "cholerine" at Nantes.

CONSULATE OF THE UNITED STATES,
Nantes, September 29, 1892.

SIR: I have the honor to report that since my dispatch No. 20, dated September 14, 1892, there has been no cholera at Nantes, and but one case of cholerine; this was on the 26th of this month; the man was at once taken to the hospital and cared for. He has recovered.

The public health is good throughout the consular district.

I am, sir, your obedient servant,

H. DE SALLIER DUPIN,
United States Consul.

To the Hon. WILLIAM F. WHARTON,
Assistant Secretary of State.

Sanitary condition of Marseilles—Russian immigration.

CONSULATE OF THE UNITED STATES,
Marseilles, September 14, 1892.

SIR: I have the honor to acknowledge the receipt of State Department circular, dated August 31, in relation to the disinfection of emigrants, and Treasury Department circular, dated September 1, on quarantine restrictions upon immigration, and to report that I at once communicated their contents to the two steamship lines plying between this port and New York, the Compagnie Nationale and the Compagnie Cyprien Fabre. These lines both carry emigrants, but they get them at Naples, and not at Marseilles. The steamships after leaving Marseilles with their cargoes of merchandise touch at Naples for their emigrants, and then proceed direct to New York.

The Compagnie Nationale's steamer *Chandunaga* leaves to-morrow; but she will not touch at Naples this trip, in consequence of the Treasury regulations, and will take no emigrants. The Cyprien Fabre steamer *Massillia* left here September 8, and will call at Naples for 800 emigrants. The company's officers assure me that there is a disinfecting plant on board the *Massillia*, and that the emigrants' baggage will be disinfected at Naples, under supervision of our consul there, or if they can not do it all there, it will be done on the voyage over.

The health of Marseilles is exceptionally good, notwithstanding the fact that Russian refugees have been allowed to enter this port with perfect freedom up to this time. Now, at this late date, and when the greatest danger has been run, their landing is forbidden.

I inclose a slip from the Petit Marseilles of September 7, containing account of the last caravan of emigrants. They are still here in Marseilles, being supported by the Jewish charitable society of this city. Efforts are being made to induce the Paris "Societe de Bienfaisance" to send them to America. The secretary of the Israelite consistory informs me that several hundred of these refugees have passed through

Marseilles in the past two months, and that some of them, he believes, aided by the Paris society, went to New York via Havre and Hamburg. None of them shipped here. All I can do is to watch the steamers from this port. The refugees passing through here going by lines from Havre, Hamburg, and Antwerp are beyond my control. As already stated in former dispatches, Marseilles is not a port of embarkation for emigrants to the United States.

I have the honor to be, sir, your obedient servant,

CHARLES B. TRAIL.

To the Hon. WILLIAM F. WHARTON,

Assistant Secretary of State.

[Translated from the Petit Marseilles of September 7, 1892.]

Yet another caravan of Jews, expelled from Russia, has been stopping at Marseilles since last week, their lodging place being in the Rue Mazmod. These unfortunate wretches will remain in this town till the Parisian Committee of Bienfaisance can send them to different destinations, and especially to America. It is not generally known that these emigrants, who are strict observers of the practices enjoined by their religion, will eat no food, especially flesh meat, unless it has been prepared according to their ritual. An orthodox Jew will only eat beef that is *casher*, i. e., killed in accordance with the rite, and then thoroughly examined by a specialist known as *schohet*, and finally sprinkled with salt and washed in water.

These unfortunate wanderers, since their departure from Russia a month ago, had neither tasted meat nor meat soup till their arrival here. They are in number about 40. Grand Rabbi Weyl, in his visit to them yesterday, noted the privations they had endured with respect to food, and he has sent them *casher* meat and vegetables, together with culinary utensils for their preparation, in order that they may prepare their food for themselves and may regain strength, especially the old and children, after the fatigues they have endured during their wearisome journey.

We should have much pleasure in congratulating Mr. Weyl on this act of intelligent charity were it not that the numerous deeds of beneficence have doubtless rendered him accustomed to such tokens of approbation, and if the poor had not long ago learned to appreciate the labors of one to whom they are so much indebted for their material prosperity.

Suspected cholera at Marseilles.

WASHINGTON, D. C., October 10, 1892.

Following received from Trail, Consul at Marseilles, "A few cases suspected cholera since October 1, not considered epidemic. No statistics obtainable."

JOHN W. FOSTER,

To the SECRETARY OF THE TREASURY.

Secretary of State.

Report on sanitary condition of Egypt.

MINISTRY OF INTERIOR, SANITARY DEPARTMENT,

Cairo, September 7, 1892.

SIR: I have to acknowledge receipt of your letter of yesterday's date and to give the information required by the same.

Deaths occurred last week, 1,021; deaths during the corresponding week of last year, 1,067.

N. B.—These deaths are for the principal towns of upper and lower Egypt (*vide* Weekly Bulletins of 1891 and 1892 inclosed). The last case of Asiatic cholera occurred on August 15, 1883.

The total number of deaths during last epidemic, viz, Asiatic cholera, was 56,107.

The epidemics that now exist are smallpox and measles, and the total number of deaths from the beginning up to date are, smallpox, 16; measles, 5.

No other epidemic, whether cholera or any other disease which spreads, does exist.

I have the honor to be, your most obedient servant,

V. SIDKY,
Subdirector.

To the AGENT AND CONSUL-GENERAL OF THE UNITED STATES.

Subsidence of choleraic epidemic in Acca and Beirut.

UNITED STATES CONSULATE,
Beirut, August 25, 1892.

SIR: With reference to my previous dispatches on cholera nostras at Acca, Syria, it affords me now much pleasure to report to your Department that the Official Gazette of the vilayet of Beirut has recently announced that the cholera nostras which broke out in that city in June last has entirely disappeared, no cholera cases or deaths having at all occurred in the Acca district since July 28, 1892.

I also have the honor to invite the attention of your Department to a circular received this day from the Beirut sanitary office by the members of the consular body residing here, of which the following is a translation:

"I have the honor to bring to your notice that by decision of the superior sanitary council the quarantine of five days imposed the 9th instant on the arrivals from the Syrian coast from Beirut, exclusive, to Jaffa, noninclusive, is suppressed and replaced by a medical visit to commence from the 11th to 23d August, 1892."

Now that the cholera nostras which appeared at Acca, and might have developed itself into a serious cholera morbus, has completely died out, it is earnestly hoped that, owing to the strict prophylactic measures that are being taken by the local authorities, this country will be spared another unwelcome visit of the dreadful plague prevailing at present in many parts of the world, and which during the last two years has greatly prejudiced the commerce of Syria and caused the death of a large number of Syrian victims.

I am, sir, your obedient servant,

CONSTANTINE KHOURI,
Hon. WILLIAM F. WHARTON, Acting U. S. Vice-Consul.
Assistant Secretary of State.

Cholera at Stettin, Germany.—In connection with his weekly statistical report, the United States consul, under date of September 28, 1892, reports as follows:

In connection with my weekly report on contagious diseases and deaths at this place, I beg to add that after a whole week no more

fatal cases of cholera have come to official notice, and that, including the first cases stated, on the 11th instant, only 19 cases and 10 deaths in all of cholera Asiatica have occurred here until this day. There have never been any cases of cholera on the steamers carrying emigrants from Stettin to New York, the last being the *Italia* and the *Polaria*, which latter is now cabled to have arrived at New York with all people well on board.

Antwerp free from cholera.

UNITED STATES CONSULATE,
Antwerp, September 23, 1892.

SIR: I have the honor to report that yesterday a message, of which the following is a copy, was cabled by me:

"STATE DEPARTMENT, Washington:

"At request of Red Star Line, I would state that no epidemic of cholera prevails here nor has prevailed here up to this date.

"LINCOLN."

The correctness of the above report will be found to be confirmed in my dispatch to you No. 31, dated September 16, 1892, since which date there has been no material change in the sanitary condition at this port.

While my telegraphing to you might be considered as uncalled for under ordinary circumstances, still, in view of the exaggerated reports which have been circulated respecting the sanitary condition of this city, it seemed justifiable to inform the Department as to the actual state of affairs.

I am, sir, your obedient servant,

GEO. F. LINCOLN,
Consul.

To the Hon. WILLIAM F. WHARTON,
Assistant Secretary of State.

Most of the emigrants were sturdy and healthy country laborers from east Prussia, and but very few Jews from Russia among them. The two steamers mentioned, as well as the emigrants and their baggage, were thoroughly disinfected here, and since then the steamer *Gothia*, carrying no more emigrants, which left Stettin on the 8th instant, as well as the steamer *Italia*, which latter vessel has just returned from New York, have, before taking in any cargo, been thoroughly disinfected either in presence of the late United States consul, James C. Kellogg, or myself.

PAUL GRISCHOW,
U. S. Vice-Consul.

Smallpox at Warrington, England.—The following has been received through the United States consul at Liverpool:

HEALTH DEPARTMENT, TOWN HALL,
Warrington, September 29, 1892.

Smallpox has been introduced into Warrington twice this year, first in May from Halifax, secondly in July from Sheffield. I consider this latter date as the beginning of our present epidemic. Total number of

- cases known to me, 103; number in hospital, 68; number at own homes, 7; number dead, 5; number in workhouse, 5; cured, etc., 18.

Yours sincerely,

JOHN H. CORNALL,
Medical Officer of Health.

CUBA—*Havana*.—The following report has been received from the United States sanitary inspector, dated October 1, 1892:

There were 581 deaths in this city during the month of September, 1892. Seventy-five of those deaths were caused by yellow fever, 20 by enteric fever, 13 by so-called pernicious fever, 1 by bilious fever, 4 by paludal fever, 3 by diphtheria and croup, and 1 by glanders.

During the week ending September 30, there were 159 deaths, 20 of whom died of yellow fever (with approximately 78 new cases), 5 died of enteric fever, 5 of so-called pernicious fever, 1 of paludal fever, and 3 of diphtheria and croup.

FRANCE—*Nantes*.—Month of August, 1893. Population, 127,482. Total deaths, 246, including smallpox, 2; typhus fever, 11; enteric fever, 52; scarlet fever, 2; and diphtheria, 1.

GREAT BRITAIN—*England and Wales*.—The deaths registered in 33 great towns of England and Wales during the week ended September 24 corresponded to an annual rate of 17.2 a thousand of the aggregate population, which is estimated at 10,188,449. The lowest rate was recorded in Croydon, viz, 8.4, and the highest in Preston, viz, 29.2 a thousand.

London.—One thousand two hundred and thirty-eight deaths were registered during the week, including measles, 8; scarlet fever, 27; diphtheria, 43; whooping cough, 12; enteric fever, 16; and diarrhea and dysentery, 65. The deaths from all causes corresponded to an annual rate of 15.1 a thousand. Diseases of the respiratory organs caused 152 deaths. In greater London 1,584 deaths were registered, corresponding to an annual rate of 14.4 a thousand of the population.

In the "outer ring" the deaths included diphtheria, 8; measles, 14; and diarrhea, 19.

Newcastle-upon-Tyne.—Two weeks June 25, 1892. Population, 132,839. Total deaths, 109, including enteric fever 26 and scarlet fever 2.

Ireland.—The average annual death rate represented by the deaths registered during the week ended September 24, in the 16 principal town districts of Ireland, was 17.2 a thousand of the population. The lowest rate was recorded in Drogheda, viz, 4.4, and the highest in Wexford, viz, 31.6 a thousand. In Dublin and suburbs 132 deaths were registered, including scarlet fever, 1; whooping cough, 1; and enteric fever, 2.

Scotland.—The deaths registered in 8 principal towns during the week ended September 24 corresponded to an annual rate of 17.9 a thousand of the population, which is estimated at 1,447,500. The lowest mortality was recorded in Dundee, viz, 15.8, and the highest in Leith, viz, 21.6 a thousand. The aggregate number of deaths registered from all causes was 499, including measles, 12; scarlet fever, 15; diphtheria, 3; whooping cough, 14; fever, 6; and diarrhea, 27.

INDIA—Singapore.—Month of July 1892. Total deaths, 516, including "fevers," 164; smallpox, 1; and beri-beri, 23.

SWITZERLAND—Zurich.—Month of August, 1892. Population, 96,839. Total deaths, 104, including phthisis pulmonalis, 8; scarlet fever, 1; diphtheria and croup, 2; and whooping cough, 1.

RUSSIA—Riga.—Month of July, 1892. Population, 200,000. Total deaths, 362, including enteric fever, 4; scarlet fever, 14; smallpox, 4; diphtheria, 13; whooping cough, 13; and "cramps," 41.

TURKEY—Constantinople.—Month of July, 1892. Total deaths, 831, including 6 from smallpox.

MORTALITY TABLE, FOREIGN CITIES.

Cities.	Week ended.	Estimated population.	Total deaths from all causes.	Deaths from—								
				Cholera.	Yellow fever.	Smallpox.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.	Whooping cough.
London.....	Sept. 17.....	5,732,204	1,770	.....	.....	.....	1	19	32	47	29	.....
London.....	Sept. 25.....	5,732,204	1,584	.....	.....	.....	16	32	51	22	.....	.....
Paris.....	Sept. 24.....	2,424,705	853	64	.....	.....	30	1	27	3	5	.....
Vienna.....	Sept. 10.....	1,406,933	542	.....	.....	1	.....	1	2	23	.....	.....
Glasgow.....	Sept. 4.....	660,059	243	.....	.....	.....	2	7	2	.....	.....	.....
Hamburg.....	Sept. 17.....	570,534	1,733	1088	.....	.....	14	1	31	.....	.....	.....
Naples.....	June 18.....	527,586	252	.....	.....	.....	1	.....	7	1	.....	.....
Naples.....	June 25.....	527,586	239	.....	.....	.....	2	1	2	.....	.....	.....
Naples.....	July 2.....	527,586	259	.....	.....	.....	1	.....	4	.....	.....	.....
Naples.....	July 9.....	527,586	256	.....	.....	.....	1	1	4	2	.....	.....
Liverpool.....	Sept. 24.....	517,951	186	.....	.....	.....	2	4	2	.....	.....	.....
Warsaw.....	Sept. 15.....	490,417	340	.....	6	.....	.....	20	11	.....	.....	.....
Brussels.....	Sept. 17.....	482,158	170	4	1	.....	2	.....	1	.....	.....	.....
Rome.....	Sept. 23.....	438,123	124	.....	.....	.....	.....	.....	3	.....	.....	.....
Lyons.....	Sept. 17.....	430,000	133	.....	.....	.....	6	.....	1	.....	.....	.....
Amsterdam.....	Sept. 10.....	426,480	163	.....	.....	.....	3	1	2	.....	.....	.....
Amsterdam.....	Sept. 17.....	426,480	142	.....	.....	.....	1	2	1	.....	.....	.....
Amsterdam.....	Sept. 24.....	426,480	150	.....	.....	.....	1	.....	2	.....	.....	.....
Cairo.....	Sept. 8.....	374,838	337	.....	1	.....	11	.....	.....	.....	.....	3
Cairo.....	Sept. 15.....	374,838	322	.....	.....	5	.....	5	2	1	1	.....
Munich.....	Sept. 10.....	366,000	189	.....	.....	.....	.....	1	4	.....	.....	.....
Munich.....	Sept. 17.....	366,000	186	.....	.....	.....	1	1	6	.....	.....	.....
Odessa.....	Sept. 17.....	302,000	154	.....	2	.....	.....	2	2	2	2	.....
Dresden.....	Sept. 17.....	301,400	111	.....	.....	.....	1	.....	3	.....	.....	.....
Cologne.....	Sept. 24.....	294,329	149	.....	.....	.....	.....	.....	3	2	3	.....
Edinburgh.....	Sept. 24.....	264,787	81	.....	.....	.....	5	.....	.....	.....	.....	.....
Palermo.....	Sept. 17.....	250,000	82	.....	.....	.....	.....	.....	.....	.....	.....	.....
Stockholm.....	Sept. 20.....	248,051	319	.....	.....	.....	4	14	30	.....	.....	.....
Alexandria.....	Sept. 8.....	231,396	161	.....	.....	.....	.....	.....	5	.....	.....	.....
Alexandria.....	Sept. 15.....	231,396	169	.....	.....	.....	2	.....	1	.....	1	.....
Rotterdam.....	Sept. 24.....	216,679	92	5	.....	.....	.....	.....	3	.....	.....	.....
Hanover.....	Sept. 17.....	185,200	83	.....	.....	.....	.....	.....	2	1	.....	.....
Prague.....	Sept. 17.....	183,703	109	.....	2	.....	1	.....	2	.....	.....	.....
Genoa.....	Sept. 24.....	181,822	68	.....	6	1	.....	.....	.....	.....	.....	.....

MORTALITY TABLE, FOREIGN CITIES—Continued.

Cities.	Week ended.	Estimated population.	Total deaths from all causes.	Deaths from—							
				Cholera.	Yellow fever.	Smallpox.	Typhus fever.	Enteric fever.	Scarlet fever.	Diphtheria.	Measles.
Trieste.....	Sept. 17.....	158,054	75					1			
Christiania.....	Sept. 17.....	156,500	41								
Nuremberg.....	Sept. 10.....	151,209	89								
Ghent.....	Sept. 17.....	150,208	70	1				3	1	4	
Ghent.....	Sept. 24.....	150,208	69	1				3			1
Hiogo.....	Aug. 27.....	142,394	126				1			1	
Hiogo.....	Sept. 3.....	142,394	96			3	1				
Hiogo.....	Sept. 10.....	142,394	130	1		3	2				
Funchal.....	Sept. 17.....	140,000	12								
Stuttgart.....	Sept. 24.....	139,659	53				1				
Bremen.....	Sept. 17.....	126,600	49							7	
Havre.....	Sept. 17.....	116,369	113					5	1	2	
Havre.....	Sept. 24.....	116,369	106					7			
Catania.....	Sept. 18.....	111,000	65					1			
Catania.....	Sept. 25.....	111,000	71					1	1		
Crefeld.....	Sept. 24.....	108,000	57						2		
Aix-la-Chapelle.....	Sept. 18.....	106,881	60								
Göthenburg.....	Sept. 17.....	105,800	31								
Leghorn.....	Sept. 25.....	103,395	41								
Pará.....	July 10.....	100,000	51								
Pará.....	July 17.....	100,000	49		1			2			
Pará.....	July 25.....	100,000	49				1	4			
Pará.....	July 31.....	100,000	35					2			
Zurich.....	Sept. 17.....	91,323	10	1							
Mannheim.....	Sept. 10.....	80,000	29			4				3	
Mannheim.....	Sept. 17.....	80,000	22								
Mannheim.....	Sept. 24.....	80,000	19								
Leith.....	Sept. 24.....	69,956	29						2		
Jerez de la Frontera.....	Sept. 3.....	61,708	33						1		
Jerez de la Frontera.....	Sept. 10.....	61,708	54					1	1	1	
Jerez de la Frontera.....	Sept. 17.....	61,708	43						1		
Marsala.....	Sept. 17.....	40,131	18					1			
Gibraltar.....	Sept. 25.....	25,755	8								
Girgenti.....	Sept. 17.....	23,847	11								
Kingston, Canada.....	Sept. 30.....	19,264	11								
Kingston, Canada.....	Oct. 7.....	19,264	9								
Victoria, B. C.....	Sept. 24.....	16,841	9								
Antigua.....	Aug. 27.....	16,664	11								
Antigua.....	Sept. 3.....	16,664	9								
Antigua.....	Sept. 10.....	16,664	14								
Antigua.....	Sept. 17.....	16,664	18								
Flushing.....	Sept. 24.....	14,000	8								
La Guayra.....	Sept. 3.....	14,000	5								
La Guayra.....	Sept. 10.....	14,000	4								
La Guayra.....	Sept. 17.....	14,000	6								
La Guayra.....	Sept. 24.....	14,000	5								
Matamoras.....	Sept. 30.....	12,000	7								
Sonneberg.....	Sept. 18.....	12,000	1								
Sonneberg.....	Sept. 25.....	12,000	6								
Guelph.....	Oct. 1.....	10,539	5								
Queenstown.....	Sept. 24.....	10,340	2								
Queenstown.....	Oct. 1.....	10,340	3								
Tuxpan.....	Sept. 24.....	10,280	11	2				2			
Chatham.....	Oct. 1.....	10,000	5								
Mexico.....	Sept. 30.....	10,000	10								
Cienfuegos.....	Aug. 7.....	8,000	15								
Sarnia.....	Oct. 1.....	6,600	3								
Santiago, Cape Verde.....	Sept. 3.....	4,600	2								
Clifton, Ont.....	Oct. 1.....	3,249	1								
Coaticook.....	Aug. 13.....	3,082	1								
Amherstburg.....	Aug. 13.....	2,266	2								

OFFICIAL:

WALTER WYMAN,

Supervising Surgeon-General Marine-Hospital Service.